WICHITA ANIMAL SHELTER 3303 N. Hillside 838-9623 / 838-9628(fax) Adoption Application

	Approved				
	Not approved				
Date:					
Officer#:					

		Adoption	Applica	ition			
Name:				Age:	Date:		
Address:			City:	:	Zip Code:		
Home Phone: Work Phone:				Employment:			
Are you the head of household? Do you live with your parents? Do you live with roommates? Are you getting this pet for: Your Family Yourself A Friend A Surprise Gift Other Other							
Are there any children in the home where the pet will be, if so please list ages							
Do you live in: Apartment □ Duplex □ Mobile Home □ House □ Other □							
Do you have a yard? Is it fenced? Type of fencing?							
What is the reason you want to adopt a pet? Will your pet be: Inside House In Backyard In Dog Run On Chain Other What type of pet do you want: Dog Cat Other Kind: Are going to have this animal spayed or neutered? Or is this animal to be used for breeding?							
PLEASE LIST PRESENT PETS:							
Type/Breed	M/F	Spayed/Neutered	Age	Where kept?	How long owned		
PLEASE LIST PAST PETS Type/Breed	M/F	Spayed/Neutered	Age	Where kept?	How long ago		
Who is your veterinarian? For how long?							
Do your present pets have update	ed rabies	s vaccination?	_ Do they	y have updated city/county li	icense?		
The information contained within this application is true and correct to the best of my knowledge.							
Signature		KS	S Drivers Lie	cense # Date			